ANNUAL REVIEW

1988/89

COMMUNITY
HEALTH
SERVICES
BRANCH

MOOSE JAW-
ASSINIBOIA-
GRAVELBOURG
HEALTH REGION # 2

TABLE OF CONTENTS

	Page
1. List of Community Health Services Region No. 2 staff.	1
2. List of Regional Board of Health Members.	2
3. List of Regional Health Councillors.	3
4. Mission Statement.	5
5. Medical Health Officer and Regional Director Report.	6
6. Director of Regional Support Services Report.	17
7. Chiropody Report.	19
8. Community Therapy Report.	22
9. Nutrition Report.	24
10. Public Health Inspection Report.	28
11. Public Health Nursing Report.	30
12. Speech and Language Pathology Report.	37

COMMUNITY HEALTH SERVICES REGION NO. 2 STAFF

MOOSE JAW STAFF

*Dr. W. S. E. Jones, Medical Health Officer and Regional Director
Mr. Hugh Coupland, Public Health Inspector II
*Mr. John Bower, Senior Public Health Inspector
*Ms. Laurie Wadsworth, Nutritionist
Mrs. Lori Durand, Speech and Language Pathologist
Mrs. Bonnie Robertson, Speech and Language Pathologist (Part-Time)
Dr. Audrey Ivanauskas, Chiropodist
Mrs. Lin Rutledge, Certified Nursing Assistant
Mrs. Ivy Kjarsgaard, Clerk Typist II
Mrs. Gerry Bowler, Clerk Typist II (Part-Time)
Mrs. Dawn Aaro, Clerk Typist II
Mrs. Cheryl Cunningham, Clerk Typist II
Ms. Pat Watling, Clerk Steno IV
*Mr. Alvin W. Thatchuk, Director of Regional Support Services
Mrs. Jean Haukaas, Public Health Nurse I
Mrs. Janice Green, Public Health Nurse I (Shared Position)
Mrs. Kathy Filipowich, Public Health Nurse I (Shared Position)
Mrs. Vicki Gauvin, Public Health Nurse I
Mrs. Lynn Macdiarmid, Public Health Nurse I
Mrs. Vivian Meikle, Public Health Nurse I
Mrs. Marilyn Johnson, Public Health Nurse I
*Mrs. Joan Whiteside, Regional Nursing Supervisor
Mrs. Sheree Nicolay, Dental Health Educator
Mrs. Donna Robinson, Public Health Nurse II

* Indicates regional responsibilities for Health Region 1 and 2.

Assiniboia District Office

Mrs. Dianne Kessler, Clerk Typist II (Part-Time)
Ms. Leanne Mellon, Public Health Nurse I
Ms. Jacquie Bitz, Public Health Nurse I
Ms. Jill Brataschuk, Public Health Nurse I
Mr. Robert Blatchford, Public Health Inspector II

Central Butte District Office

Ms. Jan O'Hara, Public Health Nurse I

Gravelbourg District Office

Mrs. Lesley Gavelin, Public Health Nurse I
Mrs. Gwen Frank, Public Health Nurse I

Morse District Office

Mrs. Esther Sigurdson, Public Health Nurse I

MOOSE JAW-ASSINIBOIA-GRAVELBOURG HEALTH REGION
NO. 2 REGIONAL BOARD OF HEALTH MEMBERS
1989 - 1990

Chairman, Mr. Doug McGregor (Health District No. 3 - Central Butte)

Vice-Chairman, Mr. B. M. Romansky (Health District No. 4 - Assiniboia)

Health District No. 1 - City of Moose Jaw

Alderman J. Hunchuk
Alderman M. Shaw
Alderman M. Stern

Health District No. 2 - Moose Jaw Rural

Mrs. Donna Smith

Health District No. 3 - Central Butte

Mr. Doug McGregor
Mrs. Bea Songer

Health District No. 4 - Assiniboia

Mr. B. M. Romansky
Mr. Doug Thompson
Mr. Pete Striha

Health District No. 5 - Gravelbourg

Mr. Dave Myles, Jr.
Mr. Vern Richmond

Health District No. 6 - Rockglen

Mrs. Jacqueline Paterson
Mr. Tom Edwards

MOOSE JAW-ASSINIBOIA-GRAVELBOURG

HEALTH REGION NO. 2

REGIONAL HEALTH COUNCIL REPRESENTATIVES - 1989

HEALTH DISTRICT NO. 1

City of Moose Jaw (City Hall)	- Councillor J. Hunchuk, 228 Main St. N., MOOSE JAW	S6H 3J8
	- Councillor M. Shaw, 228 Main St. N., MOOSE JAW	S6H 3J8
	- Councillor M. Stern, 228 Main St. N., MOOSE JAW	S6H 3J8

HEALTH DISTRICT NO. 2 - MOOSE JAW RURAL

Town of Rouleau	- Mrs. Genevieve Larson, ROULEAU	S0G 4H0
Village of Avonlea	- Ald. Michael Sudom, AVONLEA	S0H 0C0
Village of Briercrest	- E. G. (Bub) Hill, Box 235, BRIERCREST	S0H 0K0
*Village of Drinkwater	- Clerk, DRINKWATER	S0H 1G0
Village of Keeler	- [illegible]. Laurie Dekker, Box 101, KEELER	S0H 2E0
Village of Marquis	- [illegible]n R. Guillaume, MARQUIS	S0H 2X0
Village of Spring Valley	- [illegible]n J. Thiele, SPRING VALLEY	S0H 3X0
Village of Sun Valley	- [illegible]d Jenner, 1153 - 3rd Ave. N.W., MOOSE JAW	S6H 1E9
Village of Tuxford	- [illegible]. Lewie Bell, Box 1918, MOOSE JAW	S6H 7N6
R.M. of Elmsthorpe #100	- [illegible]lph Gross, 1507 Caribou St. W., MOOSE JAW	S6H 7N5
R.M. of Terrell #101	- [illegible]an Jordison, CARDROSS	S0H 0P0
R.M. of Redburn #130	- [illegible]don K. Cameron, BRIERCREST	S0H 0K0
R.M. of Baildon #131	- [illegible] Lowe, Box 1446, MOOSE JAW	S6H 4R3
R.M. of Hillsborough #132	- Donna Smith, Box 42, Sub. #1, MOOSE JAW	S6H 5V0
R.M. of Moose Jaw #161	- Dennis Hilling, Box 804, MOOSE JAW	S6H 4P5
R.M. of Caron #162	- Reeve Earl A. Bumphrey, Box 1402, MOOSE JAW	S6H 4R3
R.M. of Marquis #191	- Kenneth Purdy, Box 772, MOOSE JAW	S6H 4P5
Village of Caronport	- Mrs. Anne Appleby, CARONPORT	S0H 0S0

HEALTH DISTRICT NO. 3 - CENTRAL BUTTE

Town of Central Butte	- Doug McGregor, Box 2000, CENTRAL BUTTE	S0H 0T0
Town of Herbert	- William Parlee, Box 615, HERBERT	S0H 2A0
Town of Morse	- Ald. Lawrence S. Toews, Box 59, MORSE	S0H 3C0
Village of Chaplin	- Marlin Moore, CHAPLIN	S0H 0V0
Village of Brownlee	- Ald. Normand LeBlanc, P.O. Box 27, BROWNLEE	S0H 0M0
Village of Coderre	- Mayor John Alix, Box 9, CODERRE	S0H 0X0
Village of Ernfold	- Mayor Warren Beach, ERNFOLD	S0H 1K0
Village of Eyebrow	- Earl Smith, Box 106, EYEBROW	S0H 1L0
Village of Hodgeville	- George Dyck, HODGEVILLE	S0H 2B0
Village of Mortlach	- Alan Searle, MORTLACH	S0H 3E0
Village of Riverhurst	- Bea Songer, RIVERHURST	S0H 3P0
Village of Shamrock	- David Turner, Box 6, SHAMROCK	S0H 3W0
Village of Tugaske	- Lynford Pope, TUGASKE	S0H 4B0
R.M. of Rodgers #133	- Denise LeBrun, CODERRE	S0H 0X0
R.M. of Shamrock #134	- Edwin A. Henry, Box 40, SHAMROCK	S0H 3W0
R.M. of Lawtonia #135	- Reeve Arlen Stolson, Box 176, HODGEVILLE	S0H 2B0
R.M. of Wheatlands #163	- Rupert Gosling, MORTLACH	S0H 3E0
R.M. of Chaplin #164	- Albert Smith, CHAPLIN	S0H 0V0
R.M. of Morse #165	- Donald Jahnke, Box 90, MORSE	S0H 3C0
R.M. of Eyebrow #193	- Mrs. Karen Peterman, CENTRAL BUTTE	S0H 0T0
R.M. of Enfield #194	- Jack Andrews, CHAPLIN	S0H 0V0
R.M. of Huron #223	- Lynford Pope, TUGASKE	S0H 4B0
R.M. of Maple Bush #224	- Bea Songer, RIVERHURST	S0H 3P0
*Village of Mistusinne	- Clerk, Box 160, ELBOW	S0H 1J0

HEALTH DISTRICT NO. 4 - ASSINIBOIA

Town of Assiniboia	- Ald. Roger Rasmussen, Box 88, ASSINIBOIA	S0H 0B0
Town of Mossbank	- William McKenzie, MOSSBANK	S0H 3G0
Town of Ogema	- John Yung, OGEMA	S0C 1Y0
Village of Glentworth	- Muriel Greffard, GLENTWORTH	S0H 1V0
*Village of Limerick	- Clerk, Box 129, LIMERICK	S0H 2P0
*Village of Mazenod	- Clerk, Box 116, MAZENOD	S0H 2Y0
Village of Viceroy	- Peter Striha, VICEROY	S0H 4H0
Village of Wood Mountain	- William Mielke, WOOD MOUNTAIN	S0H 4L0
R.M. of Old Post #43	- Mark Marcenko, General Delivery, WOOD MOUNTAIN	S0H 4L0
R.M. of Waverley #44	- Borden M. Romansky, FIR MOUNTAIN	S0H 1P0
R.M. of Key West #70	- Paul Olarie, KAYVILLE	S0H 2C0
R.M. of Excel #71	- Elwin Schneikart, CRANE VALLEY	S0H 1B0
*R.M. of Lake of the Rivers #72	- Administrator, Box 610, ASSINIBOIA	S0H 0B0
*R.M. of Stonehenge #73	- Administrator, Box 129, LIMERICK	S0H 2P0
R.M. of Lake Johnston #102	- Doug Thompson, Box 1499, ASSINIBOIA	S0H 0B0
R.M. of Sutton #103, Twps. 10, 11, 12, Rge. 1 & 2, W3	- Renaud LaRochelle, Box 891, GRAVELBOURG	S0H 1X0

HEALTH DISTRICT NO. 5 - GRAVELBOURG

Town of Gravelbourg	- Aline Mulatz, Box 447, GRAVELBOURG	S0H 1X0
Town of Lafleche	- Ald. David J. Williamson, Box 424, LAFLECHE	S0H 2K0
*Village of Ferland	- Clerk, Box 87, FERLAND	S0H 1M0
Village of Hazenmore	- Mrs. Orra Thibault, Box 25, HAZENMORE	S0N 1C0
*Village of Kincaid	- Clerk, Box 177, KINCAID	S0H 2J0
Village of Mankota	- Alice Smith, MANKOTA	S0H 2W0
Village of Meyronne	- Hazel Diebel, Clerk, Box 72, MEYRONNE	S0H 3A0
Village of Palmer	- Michael Hoehn, P.O. Box 1, PALMER	S0H 3J0
*Village of Woodrow	- Clerk, Box 68, WOODROW	S0H 4M0
R.M. of Mankota #45	- Lonnie Goodwin, McCORD	S0H 2T0
R.M. of Wood River #74	- Paul M. Klein, Box 357, LAFLECHE	S0H 2K0
R.M. of Pinto Creek #75	- David Corcoran, Box 63, WOOD MOUNTAIN	S0H 4L0
R.M. of Sutton #103, Twps. 10, 11, 12, Rge. 3, W3	- Dave Myles, Jr., Box 10, CODERRE	S0H 0X0
R.M. of Gravelbourg #104	- Vern Richmond, Box 218, GRAVELBOURG	S0H 1X0
R.M. of Glen Bain #105, Twps. 10, 11, 12, Rge. 7, W3	- Ronald Miller, GLEN BAIN	S0N 0X0

HEALTH DISTRICT NO. 6 - ROCKGLEN

Town of Bengough	- Ald. John Campbell, BENGOUGH	S0C 0K0
Town of Coronach	- Harold M. Siggelkow, Box 267, CORONACH	S0H 0Z0
Town of Rockglen	- Tom Edwards, ROCKGLEN	S0H 3R0
Town of Willow Bunch	- Jacqueline Paterson, Box 261, WILLOW BUNCH	S0H 4K0
Village of Fife Lake	- Lawson Harkness, Mayor, Village of FIFE LAKE	S0H 1N0
*Village of St. Victor	- Clerk, Box 32, ST. VICTOR	S0H 3T0
R.M. of Happy Valley #10	- Louise A. Brown, Box 39, BIG BEAVER	S0H 0G0
R.M. of Hart Butte #11	- John McBurney, CORONACH	S0H 0Z0
R.M. of Poplar Valley #12	- Joan Gagne, Box 208, CORONACH	S0H 0Z0
R.M. of Bengough #40	- Administrator, Box 329, BENGOUGH	S0C 0K0
R.M. of Willow Bunch #42	- Wilfred Farwell, ST. VICTOR	S0H 4K0

* THESE VILLAGES AND R.M.s HAVE NOT APPOINTED HEALTH COUNCIL REPRESENTATIVES, MAILINGS HAVE BEEN FORWARDED TO THE CLERK OR ADMINISTRATOR AT THE LOCAL MUNICIPAL OFFICE.

MISSION STATEMENT

WORKING TOGETHER

FOR HEALTH

AND

WELL BEING

MEDICAL HEALTH OFFICER AND REGIONAL DIRECTOR

This year has seen numerous activities in the region.

Dr. J. N. Burkholder

Dr. Burkholder resigned as the Medical Health Officer and Regional Director in May, 1988 after which the position was filled part-time as of August, 1988. The gap in the appointment was due to the difficulty in getting a suitable candidate in filling this position. The present Medical Health Officer and Regional Director, Dr. Wilfred S. Jones, started in August, came on full-time on March 1, 1989, continuing as Dr. Burkholder - being responsible for Health Region No. 1. Since both regions are twinned in function for the Medical Health Officer.

Dr. Wilfred S. Jones

Dr. Jones, as the new Medical Health Officer, underwent the appropriate orientation by other Medical Health officers; administrative personnel; and by the various Heads of Disciplines he would be working with in this region. By the end of December, 1988, the Medical Health Officer visited the majority of rural offices - to meet with staff operating these offices and Child Health Clinics; to advise on current difficulties; to observe staff at work in these settings. The orientation proceeded aptly, and expeditiously with very little hitch. Inservice to the Board and various staff was undertaken in the spring.

Other changes in staff positions were as follows:

New Appointments

Ms. Laurie Wadsworth, Nutritionist (commenced November 3, 1988)
Mr. A. W. Tkatchuk, Director of Regional Support Services (commenced May 1, 1988)
Ms. Leanne Mellon, Public Health Nurse I (commenced July 1, 1988)
Ms. Jill Brataschuk, Public Health Nurse I (commenced February 6, 1989)
Ms. Jacquie Bitz, Public Health Nurse I (commenced August 15, 1988)
Mr. Robert Blatchford, Public Health Inspector II (commenced December 1, 1988)

Resignations

Dr. J. N. Burkholder, Medical Health Officer (May 6, 1988)
Dr. R. Hertzog, Early Childhood Psychologist (May 23, 1988)
Ms. Coleen Ochitwa, Public Health Nurse I (August 12, 1988)
Ms. Patricia Tymiak, Public Health Inspector II (January 6, 1989)
Ms. Carol Whorms, Clerk Typist II (September 30, 1988)
Ms. Jan Ayer, Nutritionist (September 16, 1988)
Mrs. Roberta Booth-Blackwell, Public Health Nurse I (Part-Time) (August 11, 1988)
Mrs. Dianne Rhodes, Public Health Nurse I (Part-Time) (May 24, 1988

In the Regional Office, regular senior staff meetings were held once monthly in order to review the progress of programmes; access interdisciplinary interaction; affect policies from Branch headquarters; review any pertinent matters. Heads of disciplines would then disseminate information to the rest of their associates.

EXISTING PROGRAMMES

Immunization: Pertaining to Child Health, this has continued with the same enthusiasm by parents with spurts of greater enthusiasm following any epidemic concern, as in the case of measles and meningitis. The latter having occurred elsewhere in Canada.

Communicable Diseases: Continues to be reported. A more comprehensive list, including newer diseases as E. Coli caused gastroenteritis, has recently been drawn.

Sexually Transmitted Diseases: Is being reported somewhat indifferently. Action has already commenced to rectify this. However, it has become quite evident that there is a great need to change and address the shortcoming of the Venereal Disease Act and this is being done.

The AIDS Awareness Programme: Is still being carried on but with a somewhat less enthusiasm in the schools. Inservice of AIDS in the Workplace has now started.

The Early Childhood Assessment Programmes: These programmes are continuing but it should be noted there has been some modification in the Denver and Preschool Vision Assessment schemes. The latter starting earlier now at age 3 years involving a different procedure.

Oxygen Therapy: For home utilization, involves our nurses and is seen to be overlapping with other parties involved in respiratory treatment at home as for example Home Care and Associated Respiratory Programme.

Ongoing assessment as to the need for oxygen therapy equipment is now being undertaken in order to reestablish existing needs for such equipment. These are expensive equipment. The use of which we are finding many a time are ill-advised.

Community Therapy Services: Comprising of physiotherapy and occupational therapy services, continues to exemplify its usefulness particularly in rural areas affording those who need these services to remain in their own locale with all the attendant advantages of such a strategy.

Early Childhood Psychologist: Programme has been temporarily halted due to lack of personnel available for hiring.

The Speech and Language Pathologists: Consists of one full-time and one part-time staff who complement each other in the time frame.

Public Health Inspection: Has continued to maintain the safety check in particular to food, water pollution and to a lesser degree environmental pollution. The recent desperate shortage of Public Health Inspectors is now improving as a result of intense efforts by the Branch.

Dental Health Education: Has successfully continued the Dental Health Programme in schools with dental hygiene instructions and the dental fluoride rinse performed and supervised to each child.

Chiropody Programme: Continuing successfully with no waiting list. This programme, long needed, is now well established in the care of the feet with regard to deformity; abnormality; chronic disease; manifestation of the feet as for example Diabetes Mellitus. The availability of this programme has reduced the need for invasive surgery in many.

NEW PROGRAMMES

Teen Pregnancy Programme: The Adolescent Pregnancy Programme has been recently reinaugurated to reduce this unfortunate situation. You will recall the repercussions of teenage pregnancy was discussed in the annual spring inservice session. The region greatly depends on referral of anyone to the Medical Health Officer by telephone or any other means.

Everyone Wins Programme: Draws the individual's attention to seven lifestyles which can affect the longevity and quality of life. These are:

- Nutrition
- Accident Prevention
- Physical Fitness
- Avoidance of Smoking
- Avoidance of Excessive Alcohol and Increase in Drug Awareness
- Prevention of Communicable Diseases
- Stress Control

This programme continues fervently and its promotional progress hinges on all of us making those around us aware of these virtues; that grants are available from the provincial government to catalyze or promote any or all of these items.

Serving People First: This is a programme that is intended to improve our health service in a positive manner. All staff in this region have now participated in this programme. It

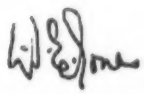
has led to the formation of Systems and Strategy Committees - both of which are intricately involved in desired changes to make serving people first acme.

"Working Together for Health and Well-Being" has now been adopted as the mission statement in the Department of Health and, indeed, is our goal. By working together, serving people first, everyone wins!

VITAL STATISTICS AND OTHER STATISTICS

These statistics are appended at the end of this report.

I wish to thank all members of the board and all members of the staff for their cooperation during the year 1988 - 1989.



Dr. W. S. E. Jones, M.B.; D.P.H.; M.R.C.O.G.
Medical Health Officer and Regional Director

WSEJ/paw

TABLE I

NUMBER OF BIRTHS OCCURRING IN SASKATCHEWAN IN 1988
BY MOTHER'S AGE, MARITAL STATUS AND HEALTH REGION

		TOTAL	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45+
TOTAL FOR PROVINCE	TOTAL	16700	36	1593	4646	6305	3240	788	88	4
	MARRIED	12446		228	3017	5507	2929	684	79	2
	OTHER	4254	36	1365	1629	798	311	104	9	2
# 1 SWIFT CURRENT	TOTAL	539	1	34	144	237	103	15	5	
	MARRIED	472		6	121	228	99	13	5	
	OTHER	67	1	28	23	9	4	2		
# 2 MOOSE JAW-ASSINIBOIA-GRAVELBOURG	TOTAL	959	1	74	275	386	174	40	8	1
	MARRIED	798		14	221	354	165	36	8	
	OTHER	161	1	60	54	32	9	4		1

These figures show the difference between Region No. 1 and Region No. 2. Region in comparison with each other and the Province of Saskatchewan.

TABLE II

TEENAGE BIRTH RATES FOR SPECIFIED AREAS
1986 - 1988

	10 - 14	15 - 19
Moose Jaw Health Region		
1986	0.43	39.71
1987*	0.41	42.38
1988*	0.41	33.48
Swift Current Health Region		
1986	-	15.69
1987*	0.57	15.40
1988*	0.56	19.47
Saskatchewan		
1986	0.49	44.93
1987	0.95	43.31
1988*	0.93	40.86
Canada		
1986	0.24	22.73
1987*	0.27	22.54
1988*	N/A	N/A

Birth rate is calculated as the number of births per 1,000 females in the specified age group.

Covered Population for 1986, 1987 and 1988 was used to calculate rates for Moose Jaw and Swift Current Health Regions and for Saskatchewan.

Statistics Canada Postcensal Estimates were used to calculate rates for Canada.

* Preliminary Data

N/A Not Available

This also reveals a slight drop in teenage birth rate except for 1988 in the 15 - 19 years age group in both twinned regions Moose Jaw and Swift Current. Teenage birth rates for the 10 - 14 year olds remain the same for 1987, 1988 for Moose Jaw. It should be noted province wide an adolescent pregnancy programme was reinaugurated as of April 1, 1989.

TABLE III

TOTAL NUMBER OF VITAL EVENTS OCCURRING IN SASKATCHEWAN IN 1988
BY HEALTH REGION

HEALTH REGION	BIRTHS	DEATHS	INFANT DEATHS	NEONATAL DEATHS	PERINATAL DEATHS	STILL BIRTHS	INFANT DEATH RATE	PERINATAL DEATH RATE
TOTAL FOR PROVINCE	16700	8084	140	85	123	53	8.38	7.34
# 1 SWIFT CURRENT	539	398	6	4	5	2	11.13	9.24
# 2 MOOSE JAW-ASSINIBOIA-GRAVELBOURG	959	696	6	4	5	2	6.26	5.20

The perinatal mortality rate is now reasonably low and it is hoped this will leave room for attention to reduce perinatal morbidity.

TABLE IV

NUMBER OF DEATHS (ICDA IN E850-E869 OR E880-E929)
OCCURING IN SASKATCHEWAN IN 1988
BY LOCATION OF DEATH AND CAUSE OF DEATH

	HOME	FARM	MINE QUARRY	INDST. PLACE	SPORT PLACE	HWY.	PUBLIC BLDG	RESID. INST.	OTHER	NOT SPEC.	NOT AVAIL.	TOTAL
ALL CAUSES OF DEATH	113	22		9	1	7	5	41	20	16	12	246
E48 ACCIDENTAL POISONING	9									5	2	16
E50 ACCIDENTAL FALLS	60			1		4	4	32	1	6	1	109
E51 ACCIDENTS CAUSED BY FIRES & FLAMES	19								1			20
E52 OTHER ACCIDENTS,LATE EFFECTS	25	22		8	1	3	1	9	18	5	9	101

The home is the most frequent place at which accidental deaths occur.

TABLE V

NUMBER OF DEATHS BY CAUSE, AGE GROUP AND SEX
OCCURRING IN SASKATCHEWAN IN 1988
FOR HEALTH REGION # 2 MOOSE JAW-ASSINIBOIA-GRAVELBOURG

	TOTAL	ALL AGES		< 15		15-24		25-44		45-64		65-74		75+	
		M	F	M	F	M	F	M	F	M	F	M	F	M	F
ALL CAUSES OF DEATH	696	393	303	6	4	7	2	10	10	62	27	106	65	202	195
08 M N OF LIP,ORAL CAVITY,PHARYNX	2	1	1	0	0	0	0	0	0	0	0	0	0	1	1
09 M N OF DIGESTIVE ORGANS,PERITONEUM	51	26	25	0	0	0	0	0	2	2	3	11	6	13	14
10 M N OF RESPIRATORY & RELATED ORGANS	44	31	13	0	0	0	0	0	0	5	3	17	5	9	5
11 M N OF BONE,SKIN,BREAST	12	2	10	0	0	0	0	0	1	1	1	1	3	0	5
12 M.N. OF GENITOURINARY ORGANS	33	21	12	0	0	0	0	0	0	2	4	3	4	16	4
13 M N OF OTHER & UNSPECIFIED SITES	15	7	8	0	0	0	0	1	0	2	1	2	5	2	2
14 M N OF LYMPH & HAEMOPOIETIC TISSUE	16	9	7	0	0	0	0	0	1	2	1	3	2	4	3
15 BENIGN NEOPLASM	1	1	0	0	0	0	0	0	0	1	0	0	0	0	0
17 OTHER & UNSPECIFIED NEOPLASM	2	2	0	0	0	0	0	0	0	0	0	1	0	1	0
18 ENDOCRINE & METABOLIC DISEASES	14	6	8	0	0	0	0	1	1	1	0	1	2	3	5
20 DIS OF BLOOD/FORMING ORGANS	5	3	2	0	0	0	0	0	1	0	0	2	0	1	1
21 MENTAL DISORDERS	10	4	6	0	0	0	0	0	0	0	0	0	0	4	6
22 DISEASES OF THE NERVOUS SYSTEM	21	14	7	0	1	0	0	1	0	2	2	5	1	6	3
25 RHEUMATIC FEVER/HEART DISEASE	1	0	1	0	0	0	0	0	0	0	0	0	0	0	1
26 HYPERTENSIVE DISEASE	6	2	4	0	0	0	0	0	0	1	0	1	2	0	2
27 ISCHAEMIC HEART DISEASE	180	108	72	0	0	0	1	3	0	24	5	26	13	55	53
28 PULMONARY & OTHER HEART DISEASE	57	27	30	0	0	0	0	0	0	1	0	8	3	18	27
29 CEREBROVASCULAR DISEASE	47	20	27	0	0	0	0	1	0	1	1	5	7	13	19
30 OTHER DISEASES OF CIRCULATORY SYSTEM	21	13	8	0	0	0	0	0	0	3	0	2	2	8	6
31 DISEASES OF UPPER RESPIRATORY TRACT	2	1	1	0	1	0	0	0	0	0	0	1	0	0	0
32 OTHER DISEASES OF RESPIRATORY SYSTEM	78	50	28	1	0	1	0	0	1	6	3	9	6	33	18
34 OTHER PARTS OF DIGESTIVE SYSTEM	11	7	4	0	0	1	0	0	0	1	1	2	0	3	3
35 DISEASES OF URINARY SYSTEM	9	3	6	1	0	0	0	0	0	0	1	1	1	1	4
43 MUSCULOSKELETAL & CONNECTIVE TISSUE	5	1	4	0	0	0	0	0	1	0	1	0	0	1	2
44 CONGENITAL ANOMALIES	4	2	2	2	1	0	0	0	1	0	0	0	0	0	0
45 CONDITIONS IN PERINATAL PERIOD	1	0	1	0	1	0	0	0	0	0	0	0	0	0	0
46 SYMPTOMS & ILL-DEFINED CONDITIONS	2	0	2	0	0	0	0	0	0	0	0	0	0	0	2
E47 TRANSPORT ACCIDENTS	14	11	3	0	0	1	1	1	0	2	0	3	2	4	0
E50 ACCIDENTAL FALLS	18	9	9	0	0	0	0	0	0	2	0	2	0	5	9
E52 OTHER ACCIDENTS,LATE EFFECTS	4	3	1	1	0	2	0	0	0	0	0	0	1	0	0
E54 SUICIDE AND SELF-INFLICTED INJURY	9	8	1	0	0	2	0	2	1	3	0	0	0	1	0
E55 HOMICIDE & INTENTIONAL INJURY	1	1	0	1	0	0	0	0	0	0	0	0	0	0	0

Ischaemic Disease of the Heart followed by other diseases of the respiratory system are the leading causes of death. The "Everyone Wins" Programme inaugurated in 1988 calls attention to alter our lifestyles. See Page 3 of the report.

TABLE VI

NUMBER OF DEATHS BY LOCATION, AGE GROUP AND SEX
OCCURRING IN SASKATCHEWAN IN 1988
DUE TO E51 ACCIDENTS CAUSED BY FIRES & FLAMES

	TOTAL	ALL AGES		< 15		15-24		25-44		45-64		65-74		75+	
		M	F	M	F	M	F	M	F	M	F	M	F	M	F
TOTAL	20	15	5	4	3	0	0	7	0	1	1	1	1	2	0
HOME	19	14	5	4	3	0	0	7	0	1	1	1	1	1	0
OTHER SPECIFIED PLACES	1	1	0	0	0	0	0	0	0	0	0	0	0	1	0

Note accidents in the home by fire is the biggest most single cause of Accidental Deaths and that at the prime of life ages 25 - 44.

TABLE VII

NUMBER OF DEATHS BY LOCATION, AGE GROUP AND SEX
OCCURRING IN SASKATCHEWAN IN 1988
DUE TO ALL CAUSES OF DEATH

	TOTAL	ALL AGES		< 15		15-24		25-44		45-64		65-74		75+	
		M	F	M	F	M	F	M	F	M	F	M	F	M	F
TOTAL	246	161	85	23	7	15	3	33	6	35	6	16	8	39	55
NOT AVAILABLE	12	6	6	2	2	1	1	1	0	0	0	1	1	1	2
HOME	113	69	44	10	4	4	1	14	5	14	4	9	5	18	25
FARM	22	20	2	2	0	5	0	4	0	7	2	2	0	0	0
INDUSTRIAL PLACE	9	9	0	0	0	2	0	6	0	1	0	0	0	0	0
PLACE OF RECREATION	1	1	0	1	0	0	0	0	0	0	0	0	0	0	0
STREET AND HIGHWAY	7	6	1	1	0	1	0	0	0	3	0	1	0	0	1
PUBLIC BUILDING	5	3	2	1	1	0	0	0	0	0	0	1	0	1	1
RESIDENTIAL BUILDING	41	18	23	1	0	0	0	0	0	2	0	0	1	15	22
OTHER SPECIFIED PLACES	20	20	0	5	0	2	0	7	0	4	0	0	0	2	0
UNSPECIFIED	16	9	7	0	0	0	1	1	1	4	0	2	1	2	4

The home is the most frequent place for causes of death. In the 75+ years of age, deaths are caused by falls not shown in the statistics here.

DIRECTOR OF REGIONAL SUPPORT SERVICES

This is the first annual report of the Director of Regional Support Services which I respectfully submit to the Moose Jaw-Assiniboia-Gravelbourg Regional Health Council.

I joined the Region staff on June 1, 1988, with joint responsibilities for Moose Jaw and Swift Current Health Region. The position was newly created in all regions in Community Health Services Branch, with the major responsibilities of the position being to provide management and administrative support to the Medical Health Officer and direct supervision over the Chiropody, Community Therapy Programmes as well as the clerical staff.

I came to the position with experience in administration although had not worked within the government service. This required me to become familiar with the Department of Health's procedures quickly in order to implement effective inhouse administrative actions consistent with Branch objectives. I could not have achieved many of the successes experienced without the cooperation of the staff in the region and support given to me by the Medical Health Officer and Branch staff. In my dealing with the Board as secretary, I found these responsibilities rewarding. The Chairman, Mr. McGregor, and the Board, as a whole were interesting individuals to work with and showed interest and enthusiasm in Health prevention. I also gained a greater appreciation for the challenges members face as Municipal Health Representatives. I wish to jointly thank all staff and Board for the positive support I realized from you in the past year. I hope I can build on this cooperative base to enlarge on and improve my services to you in the coming year.

I found the year exciting as major changes in Community Health Services Branch seemed to be happening which involved the Director of Regional Support Services.

Highlights

- "Serving People First Initiatives" - a process of reemphasizing the importance of client service and involving all staff in programme delivery improvement. This was a project which involved the D.R.S.S. as a participant and facilitator for the Branch. I look forward to working with the inhouse committees on Strategies and Systems to achieve our mission.
- "Everyone Wins Programme" - this year a new initiative in promoting a healthy lifestyle was launched. The programme's effort to involve as many groups, individuals and agencies in the objectives required the involvement of the Director of Regional Support Services to assist where possible in education and promotion.

There were administrative actions commenced within the region to help improve programme delivery, i.e., computerization, improved personnel actions, addressing facilities and space, orientation and inservice to staff.

We have set objectives for the coming year to build on the positive initiatives by dealing directly and effectively with Serving People First Committees' recommendations. I shall continue to make myself available to work with the Regional Board wherever possible in promoting Health Region's objectives. I see the future in preventive health exciting and one which is gaining renewed recognition by the general public and allied Health agencies. I will endeavor to do my part to support and promote effective Community Health Services delivery to our clients.

A. W. Tkatchuk
Director of Regional Support Services

AWT/paw

CHIROPODY

April 1st, 1988 - March 31st, 1989

With the annual general meeting for the Regional Board of Health upon us once again, this confirms the phrase that time certainly does fly. As always the Chiropody clinics continue to be busy providing footcare to the residents of this Health Region.

Since last year, there has been no change to the staff of the Chiropody Department. Mrs. Lin Rutledge remains as Chiropody Assistant, and Mrs. Ivy Kjarsgaard as quarter-time secretary/receptionist. My thanks to their continued hard work, dedication and team spirit, and also to the other clerical staff for their help and support of the Program.

All clinics continue to be fully booked, but the waiting time for first time patients is at an acceptable level. The satellite clinics are serviced once a month, though extra clinics are booked as demand necessitates. Additional days in Central Butte numbered four while in Assiniboia three extra days were booked. Change in allocation of space occurred in the Assiniboia office. We now share the clinic room with the Community Therapist that is headquartered there.

Inservices and presentations to special care homes, interested groups or associations continue to be available upon request. This year, six were requested and presented. Also, we have been giving regular training seminars to staff on the cottages in Valley View Centre. A total of twelve were given this year. The staff in Valley View seem to enjoy these hands-on practical inservices, giving them a better perspective of footcare for their residents.

In March, I gave four presentations to grade 7 and 8 students in the Public School Board system. The theme was 'Sports Safety.' The students were alert and interested and I found it to be challenging and enlightening.

The National Convention for the Canadian Podiatry Association was hosted by the Saskatchewan Association of Chiropodists in October. The weekend was extremely informative with some excellent speakers flown in from the United States and Canada.

In conclusion, the program continues to run smoothly with good response from the residents of this region and we look forward to having another productive year.

Dr. A. Ivanauskas
Chiropodist

AI/ik

CHIROPODY STATISTICS

April 1st, 1988 - March 31st, 1989

Moose Jaw

	Cat. 1	Cat. 2	Cat. 3	Cat. 4	Total
New referrals	71	50	195	154	470
Total patient visits	625	604	1,112	820	3,161
Discharges	80	48	124	147	399

Assiniboia

	Cat. 1	Cat. 2	Cat. 3	Cat. 4	Total
New referrals	12	4	21	7	44
Total patient visits	54	23	94	59	230
Discharges	5	1	11	7	24

Central Butte

	Cat. 1	Cat. 2	Cat. 3	Cat. 4	Total
New referrals	9	5	20	14	48
Total patient visits	66	46	73	49	234
Discharges	2	4	10	10	26

Orthotic prescriptions - 40
Insoles manufactured --- 73
Nail Surgeries --------- 56

Category discriptions

Category 1 - Medically at Risk, Elderly
Category 2 - Medically at Risk, General Population
Category 3 - Well, Elderly
Category 4 - General Population, Well

COMMUNITY THERAPY PROGRAMME

(February 1, 1988 to March 31, 1989)

The Community Therapy Programme officially began delivering services in October, 1986. It was set up to provide therapy services in rural Saskatchewan, particularly to hospitals under 50 beds, nursing homes under 100 beds, and community-based agencies such as Home Care, Early Childhood Intervention Programmes, schools and developmental centres.

The Community Therapists may be either occupational therapists or physical therapists and have a three-fold mandate:

1. To provide direct therapy services to individual clients;

2. To educate health care workers in areas related to rehabilitation; and

3. To educate community groups about rehabilitation and related preventative health care.

A full-time Community Therapist (with a physiotherapy background) began employment in the Moose Jaw-Assiniboia-Gravelbourg Health Region in February, 1988.

Gayleen Thomson covers:

Assiniboia Union Hospital (outpatient centre - 2 days/week)
Assiniboia Ross-Payant Nursing Home
Assiniboia Pioneer Lodge
St. Joseph's Hospital, Gravelbourg (outpatient centre - 1 day/week)
Foyer D'Youville Nursing Home, Gravelbourg
Lafleche Union Hospital
Kincaid Union Hospital
Mankota Union Hospital (integrated facility)
Rockglen Union Hospital
Coronach Union Hospital
Bengough Union Hospital
Twilight Centennial Nursing Home, Bengough

Programme statistics for the period of February 1, 1988 - March 31, 1989 are as follows:

Attendances - 2007

Direct Weighted Units - 51080 (minutes)

Indirect Weighted Units - 14390 (minutes)

New Referrals - 538

Patients Carried Over - 496

Inservices given include:

Backcare, Transfers and Lifting (9 presentations)
Respiratory Assessment and Treatment (7 presentations)
Physiotherapy as a Career (1 presentation)
Cerebral Palsy (1 presentation)

Shortly after initiation of the Community Therapy Programme, a waiting list for outpatient therapy was established in the Assiniboia outpatient centre. The waiting list, on average, constituted a 4 - 6 week waiting period for treatment.

In conclusion, the past year has been both challenging and productive. The rural people of the south seem to genuinely appreciate the efforts made to provide better health care services to them.

Gayleen Thomson (P.T.)

Gayleen Thomson, B.Sc., P.T.
Community Therapist

GT/DK

NUTRITION PROGRAM

The Public Health Nutritionist promotes optimal nutritional health for the community through provision of consultative services, information, educational resources, counselling services and programs directed to health professionals, government agencies, community groups and individuals.

The nutrition position was vacated in mid-September 1988. The position was filled on a casual basis in November, 1988 and on a permanent basis as of January, 1989.

During the 1988-89 year, the Public Health Nutritionist continued to be responsible for the nutrition program administration and delivery of services for both the Swift Current and Moose Jaw-Assiniboia-Gravelbourg Health Regions.

To meet the many and varied needs of the population served, the nutritionist participates in diverse activities, such as:

- group education sessions
- media promotional activities
- professional consultation and inservice
- program planning
- diet assessment and counselling
- resource development, and
- research

A summary of activities and progress during the past year follows:

1. Weight control has become a national obsession. Each year millions of dollars are spent on diet clinics and books, reducing aids, exercise classes and diet foods. Many Canadians feel pressured to achieve unrealistically low weights. Consequently, the promotion of healthy weights for all Canadians has become a priority. The nutritionist, as part of a provincial committee, has established promotional strategies for the healthy weight concept.

National Nutrition Month in March, again, focused on the promotion of Healthy Weights. Activities not only stressed the adoption of the body mass index (BMI) and the waist-hip ratio (WHR), but introduced the concept of low fat eating. This aspect of the promotion complements other educational programs dealing with risk reduction for chronic diseases. Included are heart diseases, high blood pressure, high blood cholesterol, some cancers and to a lesser degree, diabetes.

An educational package was developed by the Healthy Weights Promotion Committee for use with adult males. This package stresses chronic disease risk reduction. Copies have been provided to the hospital and Regional Dietitians in the area.

2. Of late, there has been much concern over pregnant women at risk for delivering low birth weight infants. The Prenatal Screening Committee was struck to investigate possible preventive measures. The nutritionist participated in the development of an educational tool for pregnant women which stresses the importance of adequate maternal weight gain. As well, developmental work was done on a more in-depth screening/assessment tool and the necessary supporting materials.

3. "Everyone Wins" grants resulted in two major health education projects in Moose Jaw schools. Grade seven and eight students city wide participated in Healthstyles '89 and the grade nine students at one of the city high schools were involved in the Health Awareness Day. These projects provided the nutritionist with an opportunity to speak to a large number of Division III students. As part of the larger Healthy Weights promotion, a presentation was developed for this age group dealing with social pressures of "Body Image in Advertising."

4. The Moose Jaw Camera Club participated in a photo contest for National Nutrition Month. Photographs of low fat, high fibre foods from the four food groups were solicited by the nutritionist. The winning photos will be used in nutrition displays within the health region. Much interest in this project was shown by other sectors of Community Health Services Branch. As a result, copies of the winning photographs were made for display at the Nutrition booth of the Lifestyles '89 shows and will be housed in central office for use in nutrition displays throughout the province.

5. To determine the learning needs of public health nurses, a needs assessment survey was conducted. The results will assist the nutritionist in planning of future inservices. Due to the decreased number of nursing staff conferences, regular nutrition updates will be provided in the form of a newsletter.

6. Group education was provided to 22 groups comprised of 394 individuals. The high demand for nutrition information and services continued, resulting in the provision of professional consultation, counselling and resources to 164 individuals, agencies, and special groups.

7. As part of a continuing commitment to professional education, one dietetic intern was provided with a three-week public health experience. Several conferences were attended during the year as part of on-going professional development.

8. The promotion of good nutritional practices as fundamental to an individual's preventive health care needs continued to be emphasized in the weekly newspaper nutrition column. This column is sent to five papers in the health region, including one new paper which has requested the column.

Thanks are extended to community members and municipal health representatives for their support of the nutrition program. As well, the staff of the health region and those in central office are thanked for their continued cooperation and support.

Respectfully submitted,

Laurie A. Wadsworth, M.Sc.
Public Health Nutritionist

LAW/da

NUTRITION STATISTICS

SERVICES	1988 - 89*
Nutrition Education & Inservice	
Number of groups	22
Attendance	394
Orientation	
Number of sessions	4
Attendance	4
Number of interns	1
Duration of experience	3 weeks
Media & Nutrition Promotion	
Press Releases	
Number researched and written	7
Number sent to newspapers	48
Number of columns edited	14
Other media contacts (TV taping)	1
Displays	1
Resource development	4
Resource review	14
Professional Consultation/Technical Support	
Health Professionals	74
Educator and Student Requests	9
Lay Public	39
Individual Client Concerns	
Consultation	9
Screened/Assessed	15
Counselled	18
Special Projects	
Prenatal Screening Committee	
Healthy Weights Promotion Committee	
Nutrition Education Needs of Public Health Nurses Project	

* Position vacant for 6 weeks and filled on a casual basis for 2 months.

PUBLIC HEALTH INSPECTION

Staff

The 1988-89 year saw quite a change in the inspection staff in the Region. I'll summarize the staff as follows:

Hugh Coupland continues to be a constant on the staff. Headquartered in Moose Jaw, he provides services to two different districts.

Pat Tymiak, Public Health Inspector in Assiniboia, left in December of 1988 for greener pastures in Alberta. She had worked for one year with the Region.

Robert Blatchford graduated and qualified as a Public Health Inspector in October of 1988 and began working in the Assiniboia office on January 3, 1989. He provides service to the Assiniboia east area and helps out in Moose Jaw on the basis of two days every other week. In Moose Jaw, he does assigned inspections.

Grant Paulson, a Public Health Inspector/farmer who lives in Hodgeville has been helping out in the Moose Jaw Region since the fall of 1988. He is headquartered in Swift Current and works the west ½ of the Moose Jaw Region on the basis of three days every other week. Grant has approximately 9 years experience with the Department and is a real asset.

Wendel Stroh, retired Public Health Inspector, worked in Swift Current and Moose Jaw for approximately 4 months last year to help out during the summer period. He provided inspection service to the City of Moose Jaw on the basis of 4 days every other week. His employment ended in September of 1988.

Peter Ross was a student Public Health Inspector here last summer. We had expected him to move to Assiniboia when he qualified in the fall but a pressing need for inspectors in the Prince Albert office led to his departure in the fall.

I continue to provide regional responsibilities for Health Region No. 1 and 2. While not a real satisfactory situation, we're trying to cope as best we can.

We are still short one full-time Public Health Inspector in Moose Jaw. This will become critical if it is not filled prior to Hugh's retirement expected in 12 to 18 months.

Progress

A new set of Public Eating Establishment Regulations was passed in December, 1988. The regulations require food handlers training for a specified number of employees. This is a very positive step.

Inspector districts were redistributed to better reflect staffing levels and headquarters.

A one-day food school was held in Moose Jaw with 20 people attending and successfully completing the examination.

One-day pool operators course held in Moose Jaw was plagued with problems, but 20 people did pass the examination.

Problems

Inspections have been involved in numerous problems in the last year. The following is a list of the more serious or extraordinary ones:

A pseudomonas skin infection from a hot tub pool.

Complaints about a private Day Care facility raised considerable legal questions regarding authority and right of inspection.

Allegation of trench mouth being spread in a school proved to be totally false.

Feuding neighbours can sometimes rope the Department into the middle of a squabble. We try our best to avoid these situations.

Air quality concerns at an indoor pool.

In general it has been an interesting and challenging year. The shortage and turnover of staff continues to be a concern.

John Bowen
Senior Public Health Inspector

JB/ik

PUBLIC HEALTH NURSING

It is my pleasure to highlight some of the Health Region #2 Public Health Nursing activities from April 1, 1988 to March 31, 1989.

This year twinning of the Regional Nursing Supervisory position from Swift Current with Moose Jaw created a major change for nursing. The Regional Nursing Supervisor is expected to spend two days per week in Moose Jaw and the rest of the time in Swift Current while assuming duties for both regions.

Health Region #2 presently has 16 PHN 1 positions, 1 assistant supervisor and 1 Regional Nursing Supervisor on staff serving a population of 69,234 and covering approximately 11,240 square miles.

POSITION CHANGES

Assiniboia office seemed to experience most of the changes this past year. Coleen Ochitwa resigned August 12, 1988. Leanne Mellon was hired as a PHN 1 July 1, 1988. Jacqueline Bitz filled the second position at Assiniboia on August 14, 1989, and we were fortunate enough to have the third position reinstated later on in the year. Jill Brataschuk commenced employment in February of 1989.

Moose Jaw city experienced only one change in January - Gisele Ferguson vacated the position with a spousal leave and at the time of this writing we are still trying to recruit into this position.

All of the other positions remained relatively stable.

PROGRAM CHANGES

1. Passport to Health Program

This program involves services to infants and preschool children from birth to four years of age at Child Health Centers. This past year, revisions were made to the Vision Program and the Speech-Language components of the program.

The cover/uncover tests were eliminated from the vision screening program. The Public Health Nurses now screen the six and nine year olds in addition to the four year olds. This program will be evaluated in 1990.

A new communication screening tool was piloted in Yorkton and Saskatoon Rural Health Regions and introduced provincially in April of 1989. The tool is more easily administered and allows for more nursing judgement. The communication screen is used with any three year olds attending CHC. The program will be evaluated over the course of the next year.

New statistical forms were also introduced July 1, 1988. It is hoped that these forms will tell us more about the services we presently offer. We welcomed the addition of a computer centrally in tabulating the results from each health region.

The Developmental portion of the program is still under review.

2. Prenatal Program

The Public Health Nurses have now been using the standardized prenatal manual for over a year. As of April 1, 1989 a PHN Support Program for adolescents was introduced with an accompanying manual. We hope to reach this age group more effectively and keep data that will tell us more about our services. The educational system, along with Social Services and the Medical Association have been involved in the planning of the program centrally.

3. Postnatal Program

Public Health Nurses continue to follow new families and to establish long-lasting relationships that maintain a health continuum along the way. It is through the varied Public Health Nursing contacts that many clients learn more about the services provided in the community.

4. SAIL Program (Saskatchewan Aids to Independent Living)

This program is continuing to involve a great deal of Public Health Nursing time. Many recommendations for change in this area have been discussed throughout the course of the year.

Several new booklets that describe the type of equipment being used and how to care for it have been implemented in the Regions and are very useful to both the client and the nurse.

5. School Program

Public Health Nurses continue to be involved in a variety of ways in the school system.

In March, 1989 all of the Moose Jaw nurses were involved in a Division 3 health promotion project in the schools. Information regarding Family Life and Nutrition was disseminated amongst the students by way of discussion, posters, handouts and displays. The nurses are to be commended on their coordination efforts. The project was considered a huge success.

6. Communicable Diseases

Responsibility for TB Control has now been transferred to the Communicable Disease Control Branch. Public Health Nurses are now more involved with contact tracing and follow-up of any reported cases.

The Haemophilus B. Conjugate vaccine (HIB vaccine) was introduced on June 1, 1988. This vaccine is being offered to children between the ages of 18 months and two years. The Public Health Nurses have implemented this program very effectively and it is hoped that the introduction of the vaccine will prevent this form of bacterial meningitis that is so common in this age group.

Another AIDS training session was held to try and recruit volunteers from the more remote parts of the region. We were more successful this time, however, requests from the general public have dwindled somewhat or Public Health Nurses are being asked to conduct the sessions because of their health background.

A communicable disease manual was introduced by the Medical Advisory Committee to assist the Public Health Nurse in the follow-up of communicable disease.

Follow-up of communicable disease has involved scabies and pediculosis screening, although salmonella, giardiasis, legionella, campylobacter, shigella and E. coli #0157. cases have been followed by the public health nurse.

Sexually transmitted diseases continue to be on the rise. The Medical Health Officer deals with the reporting of any HIV positive and/or AIDS cases.

7. Nursing Student Experience

Moose Jaw Health Region continues to participate in field experience for the WIASS nursing students. There have been approximately three rotations this past year with an average of 10 students per rotation. The PHN acts as a field guide for one-half day per student. We work in cooperation with the Providence and Moose Jaw Union Hospitals in providing the experience.

In May of 1988, we hosted one student from the College of Nursing at the University of Saskatchewan in Saskatoon.

Both the students and the staff find the experience to be of mutual benefit.

Additional Programs

The Branch has introduced the "Everyone Wins" program. This program promotes a healthy lifestyle and encourages any group to participate in a project that will benefit others with the assistance of a grant. Public Health Nurses have been called upon to assist these groups.

"Serving People First" is another program offered by the Branch that aims at improving the quality of our service delivery. All Public Health Nurses participated in this program.

I would like to take this opportunity to express my sincere thanks to all the Public Health Nurses who do an excellent job from year to year.

We welcome Dr. Jones as Medical Health Officer for the Swift Current/Moose Jaw Health Regions. It would be remiss of me not to mention all members of the health team and the clerical staff - I thank them for their continued support. The Regional Board of Health have been a great support in issues of concern and we appreciate your involvement in matters that pertain to us ... Thank you for your support and encouragement in helping us provide service.

Respectfully submitted,

J Whiteside

Joan Whiteside,
Regional Nursing Supervisor

JW/da

PUBLIC HEALTH NURSING STATISTICS

Public Health Nursing	1986-87	1987-88	1988-89
Number of Nursing Hours	24,208	22,344	22,357
Total Number of Home Visits	1,565	1,698	1,709
Postnatal Services			
Home Visits or Other Contacts	530	636	1,518
Services to Infants/ Preschool Children			
Child Health Conferences -			
Appointments Available	N/A	N/A	9,267
Appointments Scheduled	N/A	N/A	8,546
Appointments Kept	N/A	N/A	6,703
Appointments Not Kept	N/A	N/A	1,843
Home Visits/Other Contacts	664	1,485	2,129
School Health Services			
Teacher-Nurse Conference	411	317	745
Immunization Given	3,690	1,228	2,416
Adults			
Home Visits (over 65 yrs)	273	201	414
Home Visits (other)	402	387	201
Immunization	271	67	190
Other Services			
Communicable Disease Visits/ Contacts	401	472	936
Referrals to Other Agencies	N/A	N/A	348
Total Group Education Sessions	N/A	N/A	61
Sail - Home Visits/Other Contacts	652	1,456	1,293

SPEECH-LANGUAGE PROGRAM

Imagine a World Without Words

It is estimated that 70,000 children and adults in Saskatchewan have speech, language or hearing problems which significantly affect their ability to communicate. Early identification of these problems is vital to prevent possible long-term learning and communication problems.

In CHSB we provide assessments, counselling and remediation programs for pre-school children and their parents. We work closely with the parents to develop their preschoolers communication skills.

Staffing remains at one and a half positions. Clinics are held in Moose Jaw and Assiniboia weekly. Clinics in Gravelbourg, Morse and Central Butte continue to be held on an "as needed" basis. On average, clients wait three to four months for initial evaluations.

Public education is an important part of our program. This year we spoke to many students interested in speech-language pathology as a career. We also worked with other Speech-Language Pathologists in Moose Jaw to increase awareness of speech, language and hearing problems during the month of May - National Speech and Hearing Month.

Children with communication problems often have problems in other areas as well. A team approach is most successful in coordinating services for these children. Unfortunately, the position of Early Childhood Psychologist has been vacant for the past seven months. This has reduced our effectiveness in providing comprehensive remediation programs.

Because of our focus on preschool children, services to adults are limited to assessments and consultations. Without additional staff, increased service to this population will not be possible. This has been an on-going concern throughout the province.

Despite the concerns of limited time and staff we were able to provide assistance for many preschoolers and their families during the past year. It is our hope that the coming year will provide opportunities for growth and revitalization in the speech-language pathology program.

Bonnie Robertson

Lori Durand

Speech-Language Pathology
Selected Statistics

April 1, 1988 to March 31, 1989

		Lori	Bonnie
A.	Distribution of Time		
	Casework	74.1%	61.5%
	Public Education	1.9%	1.9%
	Professional Development	3.9%	6.6%
	Administration	11.8%	6.9%
	Travel	8.3%	20. %
B.	Source of Referrals		
	Public Health Nurse	116	
	Early Childhood Psychologist	2	
	Medical Doctor	14	
	S.H.A.P.	3	
	Parents	21	
	Other	26	
	Total number of referrals	182	
C.	Status of Caseload as of March 31, 1989		
	Waiting for Assessment	45	
	Waiting for Therapy	20	
	In Treatment	99	
	Overdue for Review	25	
	Total Caseload as of March 31/89	164	

DENTAL HEALTH EDUCATION

March 31, 1988 - April 1, 1989

The Dental Health Education program has had a very productive year. More than 380 presentations were completed with over 7300 students receiving dental health instruction in their schools. The program was expanded in September, 1988 to include all children in kindergarten to grade 6, inclusive. They learn brushing and flossing techniques, the importance of fluoride, dental safety, tooth structure, types of teeth and the process of peridontal disease. Learning these different aspects of dental health has made the program more informative and interesting. The school divisions in this Health Region include Assiniboia, Borderland, Davidson, Gravelbourg, Moose Jaw Public, Moose Jaw Separate, Prairie View, Thunder Creek and Wood River

Fluoride mouthrinse schools of Bengough, Coronach, Rockglen and Willow Bunch have continued with this valuable program. September is a busy month in these schools as the educator is responsible for ordering new supplies for the year and educating new teachers on the program. The educator visits all these schools to make sure the programs have commenced and are proceeding smoothly.

The preschool kit was popular again this year. Many playschools and daycares requested the use of the kit. The educator also spent time conducting workshops for the instructors. Presentations were done at St. John's Playschool in Moose Jaw and the playschool in Lafleche as part of their community workers program.

April is Dental Health Month and activities for this year included a mall display in Moose Jaw and as a guest speaker for Storybook Hour at the Assiniboia Public Library. These were great opportunities to get out into the communities and promote dental health to a different audience. An article entitled "Plaque and Periodontal Disease" written by the educator also appeared in a local newspaper.

The program has again been well accepted by students and teachers in all the schools visited. Many teachers are now asking for additional information and requesting another presentation for their health lessons when they are involved with their unit on teeth. The children seem genuinely interested in their own dental health and have been very responsive when the presentations have been done in their schools.

S. Nicolay

Sheree Nicolay
Dental Health Educator

MONTH	NUMBER OF CLASSROOMS	NUMBER of STUDENTS	TRAVELTIME	INSERVICES	ADDITIONAL PRESENTATIONS
April	41	706	8.5%		D.H. Month displays-3
May	70	1,394	9.0%	May 17-Regina Microcomputers	
June	15	160	3.5%	June 28-29 Regina D.H.E. meeting	
July/August					
September	13	227	12.0%	Sept.7&8 Saskatoon D.H.E. meeting	FL_2 mouthrinse-Willowbunch teaching staff
October	34	899	25.0%		
November	44	695	18.2%		
December	10	197	1.6%	Dec.8&9 Regina D.H.E. Meeting	
January	60	1,359	1.6%		
February	44	928	1.2%	Feb.11-Moose Jaw-Serving People First	
March	49	666	3.1%	Mar.15-16 Saskatoon D.H.E. Meeting	3 playschools-Moose Jaw 1 nursery school